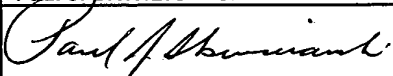
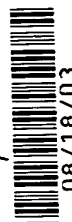
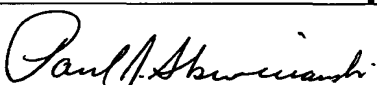


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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No.		503.39455VX1		
		First Inventor		Masaya ADACHI et al.		
		Title	LIGHT DISTRIBUTION CONTROL DEVICE AND DISPLAY APPARATUS PROVIDED WITH THE SAME			
		Express Mail Label No.				
APPLICATION ELEMENTS			ADDRESS			
SEE MPEP chapter 600 concerning patent application contents.			Mail Stop Patent Application Commissioner for Patents POB 1450 Alexandria, Virginia 22313-1450			
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages: <u>99</u>] -Descriptive title of the invention (or title page) -Cross Reference to Related Applications -Statement Regarding Fed sponsored R & D -Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Pages: <u>27</u> ; Figs <u>1-44</u>] 5. Oath or Declaration [Total Pages: <u>04</u>] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <small>(for continuation/divisional with Box 18 completed)</small> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) Named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b) ii. <input type="checkbox"/> FILED WITHOUT DECLARATION 6. <input type="checkbox"/> Application Data Sheet (See 37 CFR §1.76)			7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies			
ACCOMPANYING APPLICATION PARTS						
9. <input type="checkbox"/> Assignment(s)/Recordation Cover Form(s) PTO-1595 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <small>(when there is an assignee) (In Declarations)</small> 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input checked="" type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies/IDS Refs. Statement (IDS)/PTO-1449 13. <input checked="" type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input checked="" type="checkbox"/> Other: Form PTO-2038 (Fee Code 1001)						
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Division <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: 09/743,495 filed 10 January 2001 Prior application information: Examiner: M. Cruz Group Art Unit: 2851 CONTINUATION/DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.						
19. CORRESPONDENCE ADDRESS						
<input checked="" type="checkbox"/> Customer No./Bar Code Label		020457		or <input checked="" type="checkbox"/> Correspondence address below		
<small>(Insert Customer No/Attach bar code label here)</small>						
Name	ANTONELLI, TERRY, STOUT & KRAUS, LLP					
Address	1300 North Seventeenth Street					
	Suite 1800					
City	Arlington	State	VA	Zip Code	22209-3801	
Country	USA	Telephone	703-312-6600	Fax	703-312-6666	
Name	Paul J. SKWIERAWSKI		Registration No. (Attorney/Agent)		32,173	
Signature				Date	18 August 2003	



<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2002</h2> <p style="margin: 5px 0;">Patent fees are subject to annual revision.</p>				Complete if Known																																																																																																																																																															
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**or number previously paid, if greater; For Reissues, see above.																																																																																																																																																																			

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Paul J. SKWIERAWSKI	Registration No. (Attorney/Agent)	32,173
Signature			Telephone
			703-312-6600
		Date	18 August 2003

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